Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I									SMALL	ENTITY		OTHER THAN	
			(Column 1)			(Column 2)			TYPE		OR	SMALL	
FOR		NUMBER FILED			NUMBER EXTRA			RATE	FEE]	RATE	FEE	
BASIC FEE										345.00	OR		690.00
TOTAL CLAIMS			9.	7 minu	s 20=	*	5		X\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			N	⁷ minu	s 3 =		•	ı	X39=		OR	X78=	78
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	7 0
* If the difference in column 1 is less than zero, enter "0" in column 2								1	TOTAL		OR	TOTAL	822
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									OTHER THAT SMALL ENTITY OR SMALL ENT				
		CL	AIMS			HIGHEST	(Column 3)	Г	JIIALL	ADDI-	Un I I	SWALL	ADDI-
AMENDMENT A		AF	AINING TER IDMENT		Р	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	/	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	·	3	Minus	**	230	=		X\$ 9=		ÓR	X\$18=	
	Independent FIRST PRESE	* /	AN OF MI	Minus	**		= /	ſ	X39=		OR	X78=/	
	TINOT FRESE	NIAII	OF WIL	JETIFLE U	EPEN	DENYCLAIM	· · · · · · · · · · · · · · · · · · ·		+130=		OR	+260=	
								L	TOTAL DDIT. FEE	/		TOTAL ADDIT. FEE	
		(Colu	ımn 1)		((Column 2)	(Column 3)					NOOTT. 1 EE	
AMENDMENT B		REM. AF	AIMS AINING TER DMENT			HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	وع	7	Minus	**	23	= /4		X\$ 9=		OR	X\$18=	250
	Independent	*	10	Minus	**	· 1/	= 2		X39=		OR	X78=	168
,	FIRST PRESE	NIAIIO	ON OF MU	JUIIPLE D	=PENI	DENT CLAIM		Ī	+130=		OR	+260=	,
				•				L	TOTAL		I	TOTAL	n M
	(Column 1) (Column 2) (Column 3)								DDIT. FEE			ADDIT. FEE	
AMENDMENT C		CL/ REM/ AF	AIMS AINING TER DMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 1	13	Minus	**	37	=	ľ	X\$ 9=		OR	X\$18=	/
		*	6	Minus	**	\mathcal{L}	=	ŀ	X39=	- /	1.5	X78=	
1	FIRST PRESE	NTATIO	N OF MU	JLTIPLE D	PEN	DENT CLAIM		ŀ	7.00-	_/_	OR	7/0-	/
	f the entry in colun	nn 1 ie le	ee than th	a ontre in	luma O	write "O" in self	uma 2		+130=		OR	+260=	
**	f the "Highest Nun	nber Pre	viously Pa	aid For" IN TI	HIS SP.	ACE is less than	20. enter "20."	A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												